04/12/2006 10:12

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FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee Office Use Only 1. NAME OF **USE FEC MAILING LABEL** Example: If typing, type COMMITTEE (in full) OR TYPE OR PRINT ₩ over the lines OHIO DENTAL ASSOCIATION POLITICAL ACTION COMMITTEE 1370 DUBLIN ROAD ADDRESS (number and street) Check if different than previously **COLUMBUS** ОН 43215 reported. (ACC) FEC IDENTIFICATION NUMBER STATE. ZIPCODE 🛋 CITY A IS THIS **AMENDED** NEW C00011544 Х REPORT OR (N) (A) **TYPE OF REPORT** (b) Monthly Nov 20 (M11) Feb 20 (M2) May 20 (M5) Aug 20 (M8) (Non-Election Year Only) Report (Choose One) Due On: Dec 20 (M12) (Non-Election Year Only) Mar 20 (M3) Jun 20 (M6) Sep 20 (M9) (a) Quarterly Reports: Apr 20 (M4) Jul 20 (M7) Oct 20 (M10) Jan 31 (YE) April 15 Х Quarterly Report(Q1) (c) 12-Day Primary (12P) General (12G) Runoff (12R) July 15 PRE-Election Quarterly Report(Q2) Report for the: Convention (12C) Special (12G) October 15 Quarterly Report(Q3) January 31 Quarterly Report(YE) in the Election on State of July 31 Mid-Year (d) 30-Day Report(Non-election Year Only) (MY) Post -Election General (30G) Runoff (30R) Special (30S) Report for the: **Termination Report** (TER) in the Election on State of 0 1 0 1 2006 03 3 1 2006 Covering Period through I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete. Dr. David Rummel Type or Print Name of Treasurer Electronically Filed by Dr. David Rummel 04 12 2006 Signature of Treasurer Date NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C 437g. Office **FEC FORM 3X** Use (Rev. 02/2003) Only

SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003) OF RECEIPTS AND DISBURSEMENTS
Page 2

Report Covering the Period: From:	0 1 0 1 2 0 0 6	To: 0 3 3 1 2 0 0 6
	COLUMN A This Period	COLUMN B Calendar Year-to-Date
S. (a) Cash on Hand January 1		296687.39
(b) Cash on Hand at Begining of Reporting Period	296687.39	
(c) Total Receipts (from Line 19)	63480.00	63480.00
(d) Subtotal (add lines 6(b) and		
6(c) for Column A and Lines 6(a) and 6(c) for Column B)	360167.39	360167.39
7. Total Disbursements (from Line 31)	51439.86	51439.86
B. Cash on Hand at Close of		
Reporting Period (subtract Line 7 from Line 6(d))	308727.53	308727.53
Debts and Obligations owed TO		
the committee (Itemize all on Schedule C and/or Schedule D)	0.00	
Debts and Obligations owed BY	_	
the committee (Itemize all on Schedule C and/or Schedule D)	0.00	
X This Committee has qualified as a mult	icandidate committee. (see FEC FORM 1M)	

Federal Election Commission 999 E street, NW Washington, DC 20463

> Toll Free 800-424-9530 Local 202-694-1100

DETAILED SUMMARY PAGE OF RECEIPTS

FEC Form 3X (Rev. 02/2003) Page 3

Write or Type Committee Name

OHIO DENTAL ASSOCIATION POLITICAL ACTION COMMITTEE

0 1 м N 0 1 М М 3^D1 2006 2006 Report Covering the Period: From: To: **COLUMN A COLUMN B** I. Receipts **Total This Period** Calendar Year-to-Date 11. Contributions (other than loans) From: (a) Individuals/Persons Other Than Political Committees 13925.00 13925.00 (i) Itemized (use Schedule A) 49555.00 49555.00 (ii) Unitemized (iii) TOTAL (add 63480.00 63480.00 Lines 11(a)(i) and (ii) 0.00 0.00 (b) Political Party Committees Other Political Committees 0.00 0.00 (such as PACs) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry 63480.00 63480.00 Totals to Line 33, page 5) 12. Transfers From Affiliated/Other 0.00 0.00 Party Committees 0.00 0.00 13. All Loans Received 0.00 0.00 14. Loan Repayments Received 15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) 0.00 0.00 (Carry Totals to Line 37, page 5) 16. Refunds of Contributions Made to Federal candidates and Other 0.00 0.00 Political Committees 17. Other Federal Receipts 0.00 0.00 (Dividends, Interest, etc.) 18. Transfers from Non-Federal and Levin Funds (a) Non-Federal Account 0.00 0.00 (from Schedule H3) 0.00 0.00 (b) Levin Funds (from Schedule H5) 0.00 0.00 (c) Total Transfer (add 18(a) and 18(b)). 19. Total Receipts (add Lines 11(d), 63480.00 63480.00 12, 13, 14, 15, 16, 17, and 18(c)) 20. Total Federal Receipts 63480.00 63480.00 (subtract Line 18(c) from Line 19)

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003) Page 4

	II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
1.	Operating Expenditures: (a) Shared Federal/Non-Federal		
	Activity (from Schedule H4)	0.00	0.00
	(i) Federal Share		
	(ii) Non-Federal Share	0.00	0.00
	(b) Other Federal Operating	105.66	105.66
	Expenditures(c) Total Operating Expenditures	103.00	103.00
	(add 21(a)(i), (a)(ii) and (b))	105.66	105.66
	Transfers to Affiliated/Other Party	0.00	0.00
١.	Committees Contributions to	0.00	0.00
	Federal Candidates/Committeesand Other Political Committees	0.00	0.00
	Independent Expenditure		
	(use Schedule E)	0.00	0.00
•	Committees (2 U.S.C. 441a(d)) (use Schedule F)	0.00	0.00
	Loan Repayments Made	0.00	0.00
,	Loans Made	0.00	0.00
	Refunds of Contributions To:	0.00	0.00
	(a) Individuals/Persons Other Than Political Committees	0.00	0.00
	(b) Political Party Committees	0.00	0.00
	(c) Other Political Committees		
	(such as PACs)	0.00	0.00
	(d) Total Contribution Refunds (add Lines 28(a), (b), and (c))	0.00	0.00
	Other Dishers and the	51334.20	51334.20
∂.	Other Disbursements	51334.20	51334.20
).	Federal Election Activity (2 U.S.C 431(20))		
	(a) Shared Federal Election Activity (from Schedule H6)		
	(i) Federal Share	0.00	0.0
	,	0.00	0.00
	(ii) "Levin" Share	0.00	0.00
	(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
	(c) Total Federal Election Activity (add	0.00	0.00
	Lines 30(a)(i), 30(a)(ii) and 30(b))		
	Total Disbursements (add Lines 21(c), 22,	51439.86	51439.86
	23, 24, 25, 26, 27, 28(d), 29 and 30(c))	31438.00	51459.00
	Total Federal Disbursements		
	(subtract Line 21(a)(ii) from Line 30(a)(ii)	51439.86	51439.86
	from Line 31)	31433.00	51459.00

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) from Line 11(d), page 3)	63480.00	63480.00
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	63480.00	63480.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	105.66	105.66
37. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	105.66	105.66

S	CHEDULE A (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 6/38
IT	EMIZED RECEIPTS		or each category of the Detailed Summary Page	(check only one) X 11a
Ar	ny information copied from such Reports and Sta for commercial purposes, other than using the r	atements may	not be sold or used by any persidress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) OHIO DENTAL ASSOCIATION POLITI	CAL ACTIO	ON COMMITTEE	
Α.	Full Name (Last, First, Middle Initial) Dr. Michael Blum			Date of Receipt
	Mailing Address 55 S Miller Road Suite			02 22 7 2006
	City <u>Fairlawn</u>	State OH	Zip Code 44333-4167	Transaction ID: SA11A1.18053 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		425.00
	Name of Employer Self-Employed	Occupation Dentist	n	
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 500.00	
В.	Full Name (Last, First, Middle Initial) Dr. Stephen Branam Mailing Address 3140 Dustin Road			Date of Receipt
	City	State	Zip Code	0 1 2 5 2 0 0 6 Transaction ID: SA11A1.18075
	Oregon	OH	43616-4341	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		250.00
	Name of Employer Self-Employed	Occupation Dentist	n	
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 250.00	
<u>с.</u>	Full Name (Last, First, Middle Initial) Dr. George S. Cochran			Date of Receipt
	Mailing Address 1066 Chelsea Ave			03 / 01 / 2006
	City Napoleon	State OH	Zip Code 43545	Transaction ID: SA11A1.18135 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		250.00
	Name of Employer Self-Employed	Occupation Dentist	n	
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 250.00	
s	UBTOTAL of Receipts This Page (optional)			925.00
Ļ	OTAL This Period (last page this line number o	nlv)		

PAGE 7/38 FOR LINE NUMBER: Use separate schedule(s) (check only one) or each category of the ITEMIZED RECEIPTS 11a 11b 11c **Detailed Summary Page** 13 17 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) OHIO DENTAL ASSOCIATION POLITICAL ACTION COMMITTEE Full Name (Last, First, Middle Initial) Date of Receipt A. Dr. George S. Cochran Mailing Address 1066 Chelsea Ave 03 2006 06 City State Zip Code Transaction ID: SA11A1.18134 **Napole**on OH 43545 Amount of Each Receipt this Period FEC ID number of contributing 250.00 C federal political committee. Name of Employer Self-Employed Occupation Dentist Receipt For: Aggregate Year-to-Date 🔻 Primary General 500.00 Other (specify) Full Name (Last, First, Middle Initial) B. Dr. Nicole Cochran Date of Receipt Mailing Address 15901 Hilliard Road 0.1 18 2006 City State Zip Code Transaction ID: SA11A1.18137 Lakewood OH 44107 Amount of Each Receipt this Period FEC ID number of contributing C 250.00 federal political committee. Name of Employer Self-Employed Occupation Dentist Receipt For: Aggregate Year-to-Date V Primary General 250.00 Other (specify) Full Name (Last, First, Middle Initial) C. Dr. Christopher Connell Date of Receipt Mailing Address 5406 Mayfield Road 03 23 2006 Zip Code Citv State Transaction ID: SA11A1.18139 Cleveland OH Amount of Each Receipt this Period FEC ID number of contributing 500.00 C federal political committee. Name of Employer Self-Employed Occupation Dentist Receipt For: Aggregate Year-to-Date ▼ Primary General 500.00 Other (specify) 1000.00 SUBTOTAL of Receipts This Page (optional)

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X)			Use separate schedule(s)	FOR LINE NUMBER: PAGE 8/38
	EMIZED RECEIPTS		or each category of the Detailed Summary Page	(check only one) X 11a 11b 11c 12 13 14 15 16 17
An or	y information copied from such Reports and State for commercial purposes, other than using the nar	ments may me and ado	not be sold or used by any perso lress of any political committee to	n for the purpose of soliciting contributions
$\overline{\rangle}$	NAME OF COMMITTEE (In Full) OHIO DENTAL ASSOCIATION POLITICA	AL ACTIC	ON COMMITTEE	
Α.	Full Name (Last, First, Middle Initial) Dr. Robert Demboski Mailing Address 525 N Cleveland Massillo City Akron FEC ID number of contributing federal political committee.	State OH	Zip Code 44333-3332	Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	Self-Employed	Occupation Dentist Aggregate	Year-to-Date ▼ 250.00	
Full Name (Last, First, Middle Initial) Dr. H Fick Mailing Address 3015 Navarre Avenue Suite B				Date of Receipt 0 1 2 3 2 0 0 6
	City	State	Zip Code	Transaction ID: SA11A1.18199
	Oregon	OH	43616	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		500.00
	Self-Employed	Occupatior Dentist	1	
	Receipt For: Primary General Other (specify) ▼		Year-to-Date ▼ 500.00	
<u> </u>	Full Name (Last, First, Middle Initial) Dr. Henry W. Fields			Date of Receipt
	Mailing Address 305 W 12th Ave OSU College of Dentistry			01 18 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City Columbus	State OH	Zip Code 43218-2357	Transaction ID: SA11A1.18200 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	102.10.2007	250.00
	Self-Employed	Occupation Dentist	ו	
	Receipt For: Primary General Other (specify) ▼		Year-to-Date ▼ 250.00	
S	UBTOTAL of Receipts This Page (optional)		>	1000.00
т,	OTAL This Period (last page this line number only	٨		

S	CHEDULE A (FEC Form 3X)			FOR LINE NUMBER: PAGE 9/38				
•			Use separate schedule(s) or each category of the	(check only one)				
ITEMIZED RECEIPTS		Detailed Summary Page		X 11a 11b 11c 12				
				13 14 15 16 17				
Ar or	ny information copied from such Reports and St for commercial purposes, other than using the	atements may name and add	not be sold or used by any pers dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.				
\setminus	NAME OF COMMITTEE (In Full)							
\rangle	OHIO DENTAL ASSOCIATION POLITI	CAL ACTIC	ON COMMITTEE					
Α.	Full Name (Last, First, Middle Initial) Dr. Gregory Garey			Date of Receipt				
	Mailing Address 3296 W Market Street			01 25 7 2006				
	City	State	Zip Code	Transaction ID: SA11A1.18228				
	Fairlawn	OH	44333-3355	Amount of Each Receipt this Period				
	FEC ID number of contributing federal political committee.	C		500.00				
	Name of Employer Self-Employed	Occupation Dentist	1					
	Receipt For:		e Year-to-Date ▼					
	Primary General			7				
	Other (specify) ▼		500.00					
В.	Full Name (Last, First, Middle Initial) Dr. Krikor Ghazarian			Date of Receipt				
	Mailing Address 6774 St Ives Blvd			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y				
	City	State	Zip Code	Transaction ID: SA11A1.18234				
	Hudson	OH	44236	Amount of Each Receipt this Period				
	FEC ID number of contributing federal political committee.	C		500.00				
	Name of Employer Self-Employed	Occupation Dentist	1					
	Receipt For:	Aggregate	e Year-to-Date ▼					
	Primary General Other (specify) ▼	0 0	500.00					
<u>с</u>	Full Name (Last, First, Middle Initial) Dr. Bruce Grbach			Date of Receipt				
J .	Mailing Address 9203 Mentor Avenue			M M / D D / Y Y Y Y Y Y O O O O O O O O O O O O O				
	City	State	Zip Code	Transaction ID: SA11A1.18256				
	Mentor	OH	44060	Amount of Each Receipt this Period				
	FEC ID number of contributing							
	federal political committee.	C		500.00				
	Name of Employer Self-Employed		ו					
	Receipt For:	Aggregate	e Year-to-Date ▼					
	Primary General Other (specify) ▼		500.00					
s	UBTOTAL of Receipts This Page (optional)		······	1500.00				
\vdash								
T	OTAL This Period (last page this line number of	only)						

SCHEDULE A (FEC Form 3X)			Use separate schedule(s)	FOR LINE NUMBER: PAGE 10 / 38					
IT	EMIZED RECEIPTS		or each category of the	(check only one)					
II LIVIIZED RECEIP 13			Detailed Summary Page	X 11a 11b 11c 12					
				13 14 15 16 17					
or	ny information copied from such Reports and State for commercial purposes, other than using the name	ments may me and add	r not be sold or used by any person dress of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.					
	NAME OF COMMITTEE (In Full)								
\rangle	OHIO DENTAL ASSOCIATION POLITICA	AL ACTIC	ON COMMITTEE						
Α.	Full Name (Last, First, Middle Initial) Dr. Marc Greenbaum			Date of Receipt					
	Mailing Address 18611 Detroit Ave			02 17 2006					
	City	State	Zip Code	Transaction ID: SA11A1.18259					
	Lakewood	ОН	44107	Amount of Each Receipt this Period					
	FEC ID number of contributing federal political committee.	C		1000.00					
	Self-Employed	Occupation Dentist	1	7					
	Receipt For:	Aggregate	Year-to-Date ▼	7					
	Primary General		1000.00	1					
	Other (specify) ▼		1000.00]					
— В.	Full Name (Last, First, Middle Initial) Dr. David Haas			Date of Receipt					
	Mailing Address 3500 W Market St			M M / D D / Y Y Y Y					
			03 13 2006						
	City	State	Zip Code	Transaction ID: SA11A1.18264					
	Akron	OH	44333	Amount of Each Receipt this Period					
	FEC ID number of contributing federal political committee.	C		250.00					
	Name of Employer Self-Employed	Occupation	1	7					
	Self-Employed	Dentist							
	Receipt For:	Aggregate	Year-to-Date ▼						
	Primary General	· · ·	250.00	1					
	Other (specify)		250.00	1					
<u> </u>	Full Name (Last, First, Middle Initial) Dr. Roger Haas			Date of Receipt					
	Mailing Address 1234 Portage Trl			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y					
	City	State	Zip Code	Transaction ID: SA11A1.18266					
	Cuyahoga Falls	ОН	44223	Amount of Each Receipt this Period					
	FEC ID number of contributing federal political committee.	C		75.00					
	Self-Employed 1	Occupation Dentist	1						
	Receipt For:	Aggregate	Year-to-Date ▼	7					
	Primary General	-	050.00	1					
	Other (specify) ▼	0 0	250.00	1					
Г									
s	UBTOTAL of Receipts This Page (optional)			1325.00					
				-					

PAGE 11/38 FOR LINE NUMBER: Use separate schedule(s) (check only one) or each category of the ITEMIZED RECEIPTS 11a 11b 11c **Detailed Summary Page** 13 17 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) OHIO DENTAL ASSOCIATION POLITICAL ACTION COMMITTEE Full Name (Last, First, Middle Initial) Date of Receipt A. Dr. Brian Hockenberger Mailing Address 4322 S Cleveland-Massillon Rd 03 15 2006 City State Zip Code Transaction ID: SA11A1.18302 **Norton** OH 44203 Amount of Each Receipt this Period FEC ID number of contributing 250.00 C federal political committee. Name of Employer Self-Employed Occupation Dentist Receipt For: Aggregate Year-to-Date 🔻 Primary General 250.00 Other (specify) Full Name (Last, First, Middle Initial) B. Dr. Robert Jensen Date of Receipt Mailing Address 7100 Corporate Way 02 27 2006 City Transaction ID: SA11A1.18325 State Zip Code Dayton OH 45459 Amount of Each Receipt this Period FEC ID number of contributing C 250.00 federal political committee. Name of Employer Self-Employed Occupation Dentist Receipt For: Aggregate Year-to-Date V Primary General 250.00 Other (specify) Full Name (Last, First, Middle Initial) C. Dr. Jennifer Kale Date of Receipt Mailing Address 10135 Darrow Rd 02 24 2006 Zip Code Citv State Transaction ID: SA11A1.18338 **Twinsburg** OH 44087 Amount of Each Receipt this Period FEC ID number of contributing 250.00 C federal political committee. Name of Employer Self-Employed Occupation Dentist Receipt For: Aggregate Year-to-Date ▼ Primary General 250.00 Other (specify) 750.00 SUBTOTAL of Receipts This Page (optional)

TOTAL This Period (last page this line number only)

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	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS		Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 12/38 (check only one) X 11a 11b 11c 12 13 14 15 16 17
Ar or	y information copied from such Reports and Sta for commercial purposes, other than using the r	atements may	not be sold or used by any persodress of any political committee to	on for the purpose of soliciting contributions oslicit contributions from such committee.
\setminus	NAME OF COMMITTEE (In Full) OHIO DENTAL ASSOCIATION POLITI	CAL ACTIO	ON COMMITTEE	
Α.	Full Name (Last, First, Middle Initial) Dr. Lawrence Kaye			Date of Receipt
	Mailing Address 227 W Bowery St			03 16 2006
	City Akron	State OH	Zip Code 44308	Transaction ID: SA11A1.18345 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		250.00
	Name of Employer Self-Employed	Occupation Dentist	n	
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 250.00	
В.	Full Name (Last, First, Middle Initial) Dr. David Kimberly			Date of Receipt
	Mailing Address 554 White Pond Dr. Su	ite B		03 / 09 / 7 7 7 7
	City Akron	State OH	Zip Code 44320-1146	Transaction ID: SA11A1.18353
	FEC ID number of contributing federal political committee.	C	44320-1140	Amount of Each Receipt this Period 250.00
	Name of Employer Self-Employed	Occupation Dentist	n	
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 250.00	
<u> </u>	Full Name (Last, First, Middle Initial) Dr. Raymond Kimberly			Date of Receipt
	Mailing Address 1852 Merriman Road			03
	City <u>Akron</u>	State OH	Zip Code 44313-5254	Transaction ID: SA11A1.18355 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		250.00
	Name of Employer Self-Employed	Occupation Dentist	1	
	Receipt For: Primary General	Aggregate	e Year-to-Date ▼	
	Other (specify) ▼		250.00	
s	UBTOTAL of Receipts This Page (optional)			750.00

TOTAL This Period (last page this line number only)

S	CHEDULE A (FEC Form 3X)		FOR LINE NUMBER: PAGE 13 / 38 (check only one)										
ıт	EMIZED RECEIPTS												
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					, ,		13	14	Ш	15	16		17
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\setminus	NAME OF COMMITTEE (In Full)												
\rangle	OHIO DENTAL ASSOCIATION POLITIC	CAL ACTIC	ON COI	MMITTEE									
Α.	Full Name (Last, First, Middle Initial) Dr. Richard Klespies					Da	ate of Re	eceipt					
	Mailing Address 10568 Ravenna Rd #8						м м / 0 3		^D 7	/ Y	200		
	City	State	Zip	Code		Tra	ansactio	on ID:	SA	11A1.	18363		
	Twinsburg	ОН	440	087			mount of					1	
	FEC ID number of contributing federal political committee.	С					1 1				250.		
	Name of Employer Self-Employed	Occupation Dentist	n										
	Receipt For:	Aggregate	Year-to	o-Date ▼									
	Primary General				-								
	Other (specify) ▼	0 0	0 0	0 0 0	250.00								
В.	Full Name (Last, First, Middle Initial) Dr. James G. Kotapish, Jr					Da	ate of Re	eceipt					
	Mailing Address 130 N Miller Rd						01 10 7 9 9 9						
	City	State	Zip	Code		Tra	ansactio	on ID:	SA	11A1.	18375		
	Akron	OH	44	333		ıA	mount of	Each	Rec	eipt this	Period	ı	
	FEC ID number of contributing	-				1	•	050	00				
	federal political committee.	C	_	-	_			250.	00				
	Name of Employer Self-Employed	Occupation Dentist	n										
	Receipt For:	Aggregate	Year-to	o-Date ▼									
	Primary General		1 1	1 1 1	050.00								
	Other (specify) ▼		0 0	0 0 0	250.00								
C.	Full Name (Last, First, Middle Initial) Dr. Edward Kurz					Da	ate of Re	eceipt					
	Mailing Address 330 N Chestnut Street						0 2 /		D 4	/ Y	200		
	City	State	Zip	Code		Tra	ansactio	on ID:	SA	11A1. ⁻	18385		
	Ravenna	OH	44:	266-2216		Aı	mount of	Each	Rec	eipt this	Period	1	
	FEC ID number of contributing federal political committee.							250.	00				
	Name of Employer Self-Employed	Occupation Dentist	n										
	Receipt For: Primary General Other (specify)	Aggregate	e Year-to	p-Date ▼	250.00								
s	UBTOTAL of Receipts This Page (optional)				>				•		750.	00	

PAGE 14/38 FOR LINE NUMBER: Use separate schedule(s) (check only one) or each category of the ITEMIZED RECEIPTS 11a 11b 11c **Detailed Summary Page** 13 17 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) OHIO DENTAL ASSOCIATION POLITICAL ACTION COMMITTEE Full Name (Last, First, Middle Initial) Date of Receipt A. Dr. Billie Sue Kyger Mailing Address 126 Second Ave 0.1 25 2006 City State Zip Code Transaction ID: SA11A1.18386 Gallipolis OH 45631-9803 Amount of Each Receipt this Period FEC ID number of contributing 250.00 C federal political committee. Name of Employer Self-Employed Occupation Dentist Receipt For: Aggregate Year-to-Date 🔻 Primary General 250.00 Other (specify) Full Name (Last, First, Middle Initial) B. Dr. Woodrow Lahr Date of Receipt Mailing Address 4774 Munson Ave NW 0.1 25 2006 Suite 102 City State Zip Code Transaction ID: SA11A1.18387 Canton OH 44632 Amount of Each Receipt this Period FEC ID number of contributing C 250.00 federal political committee. Name of Employer Self-Employed Occupation Dentist Receipt For: Aggregate Year-to-Date V Primary General 250.00 Other (specify) Full Name (Last, First, Middle Initial) C. Dr. Craig Lanik Date of Receipt Mailing Address 12033 Cleveland Avenue Northwe 02 23 2006 Citv State Zip Code Transaction ID: SA11A1.18393 Uniontown OH 44685-8482 Amount of Each Receipt this Period FEC ID number of contributing 1000.00 C federal political committee. Name of Employer Self-Employed Occupation Dentist Receipt For: Aggregate Year-to-Date ▼ Primary General 1000.00 Other (specify) 1500.00 SUBTOTAL of Receipts This Page (optional)

TOTAL This Period (last page this line number only)

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	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS		Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 15/38 (check only one) X 11a 11b 11c 12 13 14 15 16 17
Ar	y information copied from such Reports and Sta for commercial purposes, other than using the n	tements may	/ not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions
\setminus	NAME OF COMMITTEE (In Full) OHIO DENTAL ASSOCIATION POLITIC	CAL ACTIO	DN COMMITTEE	
Α.	Full Name (Last, First, Middle Initial) Dr. Robert Lazarow			Date of Receipt
	Mailing Address 2858 S Arlington Road #	#200		01 25 7 2006
	City <u>Akron</u>	State OH	Zip Code 44312-4746	Transaction ID: SA11A1.18403 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		250.00
	Name of Employer Self-Employed	Occupation Dentist	1	
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 250.00	
В.	Full Name (Last, First, Middle Initial) Dr. Ronald Lemmo			Date of Receipt
	Mailing Address 2775 Bishop Rd Suite A			03 15 2006
	City Willoughby Hills	State OH	Zip Code 44092	Transaction ID: SA11A1.18410 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		250.00
	Name of Employer Self-Employed	Occupation Dentist	n	
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 250.00	
C.	Full Name (Last, First, Middle Initial) Dr. Michael Murphy Mailing Address 525 N Cleveland Massill	lon		Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City Akron	State OH	Zip Code 44333	Transaction ID: SA11A1.18476
	FEC ID number of contributing federal political committee.	C	44333	Amount of Each Receipt this Period 500.00
	Name of Employer Self-Employed	Occupation Dentist	n	
	Receipt For: ☐ Primary ☐ General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 500.00	
	LIRTOTAL of Receipts This Page (optional)			1000.00

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or	y information copied from such Reports and Sta for commercial purposes, other than using the n	tements may ame and add	r not be sold or used by any perso Iress of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.				
	NAME OF COMMITTEE (In Full)							
	OHIO DENTAL ASSOCIATION POLITIC	CAL ACTIC	ON COMMITTEE					
Α.	Full Name (Last, First, Middle Initial) Dr. Mark Perko			Date of Receipt				
	Mailing Address 673 E Wilbeth Rd			02 24 2006				
	City	State	Zip Code	Transaction ID: SA11A1.18508				
	Akron	OH	44306	Amount of Each Receipt this Period				
	FEC ID number of contributing federal political committee.	C		250.00				
	Name of Employer Self-Employed	Occupation Dentist	1	7				
	Receipt For:	Aggregate	Year-to-Date ▼	7				
	Primary General			1				
	Other (specify) ▼	1	250.00					
				A				
В.	Full Name (Last, First, Middle Initial) Dr. Cynthia Petroff			Date of Receipt				
	Mailing Address 3725 Cleveland Massillo	M M / D D / Y Y Y Y						
		03 02 2006						
	City	State	Zip Code	Transaction ID: SA11A1.18514				
	Norton	OH	44203-5614	Amount of Each Receipt this Period				
	FEC ID number of contributing		• • • • • •	500.00				
	federal political committee.	C		500.00				
		l a		_				
	Name of Employer Self-Employed	Occupation	1					
	5	Dentist	·	_				
	Receipt For: Primary General	Aggregate	Year-to-Date ▼					
	Primary General Other (specify) ▼	' '	500.00					
	Other (specify)		0 0 0 0 0 0 0	J.				
_	Full Name (Last, First, Middle Initial)							
C.	Dr. Loren Petry			Date of Receipt				
	Mailing Address 508 E Exchange Street			M M / D D / Y Y Y Y				
	City	State	Zip Code	02 24 2006				
	Akron	OH	•	Transaction ID: SA11A1.18516				
		On	44304	Amount of Each Receipt this Period				
	FEC ID number of contributing federal political committee.	C		250.00				
	Name of Employer Self-Employed	Occupation	1					
		Dentist						
	Receipt For:	Aggregate	Year-to-Date ▼					
	Primary General		250.00	1				
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Δr	y information copied from such Reports and Sta	tements may	y not be sold or used by any perso					
or	for commercial purposes, other than using the n	ame and add	dress of any political committee to	solicit contributions from such committee.				
\setminus	NAME OF COMMITTEE (In Full)							
\rangle	OHIO DENTAL ASSOCIATION POLITIC	CAL ACTIC	ON COMMITTEE					
Α.	Full Name (Last, First, Middle Initial) Dr. Theodore Pope			Date of Receipt				
	Mailing Address 16 W Wenger Rd			03 29 2006				
	City	State	Zip Code	Transaction ID: SA11A1.18522				
	Englewood	ОН	45322	Amount of Each Receipt this Period				
	FEC ID number of contributing federal political committee.	C		250.00				
	Name of Employer Self-Employed	Occupation Dentist	1					
	Receipt For: Primary General	Aggregate	Year-to-Date ▼	1				
	Other (specify) ▼	0 0	250.00					
В.	Full Name (Last, First, Middle Initial) Dr. Samuel Pupino			Date of Receipt				
	Mailing Address 554 White Pond Dr. Suit	03 16 2006						
	City	State	Zip Code	Transaction ID: SA11A1.18532				
	Akron	ОН	44320-1146	Amount of Each Receipt this Period				
	FEC ID number of contributing							
	federal political committee.	C		250.00				
	Name of Employer Self-Employed	Occupation Dentist	1					
	Receipt For:	Aggregate	Year-to-Date ▼					
	Primary General		250.00	1				
	Other (specify)		230.00					
_	Full Name (Last, First, Middle Initial)			-				
C.	Dr. Judy Robinson			Date of Receipt				
	Mailing Address 15 Southmoor Circle NE		03					
	City	State	Zip Code	Transaction ID: SA11A1.18560				
	Kettering	OH	45429	Amount of Each Receipt this Period				
	FEC ID number of contributing federal political committee.	С		250.00				
	Name of Employer Self-Employed	Occupation Dentist	1					
	Receipt For:	1	Year-to-Date ▼	7				
	Primary General		050.00	1				
	Other (specify)		250.00	J.				
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s	UBTOTAL of Receipts This Page (optional)			750.00				
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	CHEDULE A (FEC Form 3X)		Use separate schedule(s) or each category of the	FOR LINE NUMBER: PAGE 18 / 38 (check only one)
П	EMIZED RECEIPTS		Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16 17
Ar or	y information copied from such Reports and Sta for commercial purposes, other than using the r	atements may	not be sold or used by any persodress of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
\setminus	NAME OF COMMITTEE (In Full) OHIO DENTAL ASSOCIATION POLITI	CAL ACTIO	ON COMMITTEE	
Α.	Full Name (Last, First, Middle Initial) Dr. John Santin			Date of Receipt
	Mailing Address 3503 Fortuna Drive Suit	te 1		03 09 7 7 7 7
	City Akron	State OH	Zip Code 44312	Transaction ID: SA11A1.18578 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		500.00
	Name of Employer Self-Employed	Occupation Dentist	ı	
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 500.00	
В.	Full Name (Last, First, Middle Initial) Dr. R Gregory Shelhouse			Date of Receipt
	Mailing Address 5685 Far Hills Avenue			02 / 27 / 2006
	City	State	Zip Code	Transaction ID: SA11A1.18600
	Dayton FEC ID number of contributing federal political committee.	OH C	45429	Amount of Each Receipt this Period 250.00
	Name of Employer Self-Employed	Occupation Dentist	ı	
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 325.00	
<u> </u>	Full Name (Last, First, Middle Initial) Dr. David Sinar			Date of Receipt
	Mailing Address 1212 Portage Trail			03 / 20 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State	Zip Code	Transaction ID: SA11A1.18615
	Cuyahoga Falls	OH	44223-2128	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		100.00
	Name of Employer Self-Employed	Occupation Dentist	1	
	Receipt For:	Aggregate	e Year-to-Date ▼	
	Primary General Other (specify) ▼		250.00	
s	UBTOTAL of Receipts This Page (optional)			850.00

S	CHEDULE A (FEC Form 3X)			FOR LINE NUMBER: PAGE 19/38
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Ar	y information copied from such Reports and States for commercial purposes, other than using the r	tements may	not be sold or used by any perso	on for the purpose of soliciting contributions
or		ame and add	dress of any political committee to	solicit contributions from such committee.
	NAME OF COMMITTEE (In Full)			
17	OHIO DENTAL ASSOCIATION POLITI	CAL ACTIC	ON COMMITTEE	
_	Full Name (Leat First Middle Initial)			
Α.	Full Name (Last, First, Middle Initial) Dr. Richard Sundheimer			Date of Receipt
	Mailing Address 789 White Pond Dr. Sui	te R		M M / D D / Y Y Y Y
	700 111110 1 0110 211 001	.0 5		03 01 2006
	City	State	Zip Code	Transaction ID: SA11A1.18659
	Akron	OH	44320	Amount of Each Receipt this Period
	FEC ID number of contributing			250.00
	federal political committee.	C		250.00
	Name of Canalassas	10		_
	Name of Employer Self-Employed	Occupation Dentist	ı	
	Receipt For:		Year-to-Date ▼	-
	Primary General	Aggregate	real to Bate ¥	1
	Other (specify)		250.00	
			0 0 0 0 0 0 0	
	Full Name (Last, First, Middle Initial)			
В.	Dr. Phillip Weisenbarger			Date of Receipt
	Mailing Address PO Box 103			M M / D D / Y Y Y Y
	122 Thurman Street	01-1-	7'- 0-4-	01 25 2006
	City	State	Zip Code	Transaction ID: SA11A1.18717
	Bluffton	OH	45817-1306	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		250.00
	rederai politicai committee.			
	Name of Employer Self-Employed	Occupation	1	
	Seir-Employed	Dentist		
	Receipt For:	Aggregate	e Year-to-Date ▼	
	Primary General		250.00	
	Other (specify)		230.00	
C.	Full Name (Last, First, Middle Initial) Dr. Michael Wine			Date of Receipt
•	Mailing Address 2655 Columbus St			M M / D D / Y Y Y Y
	2000 Columbus Ct			02 21 2006
	City	State	Zip Code	Transaction ID: SA11A1.18740
	Grove City	OH	43123	Amount of Each Receipt this Period
	FEC ID number of contributing			250.00
	federal political committee.	C		250.00
	Name of Employer	Occupation	<u> </u>	\dashv
	Name of Employer Self-Employed	Dentist	•	
	Receipt For:	1	Year-to-Date ▼	
	Primary General	99. 09410	1 1 1 1 1 1 1 1	1
	Other (specify) ▼	1	250.00	
				1
s	UBTOTAL of Receipts This Page (optional)			750.00
\vdash	,			

A. Dr. Michael Wine

Grove City

Receipt For:

City

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

NAME OF COMMITTEE (In Full)

Full Name (Last, First, Middle Initial)

FEC ID number of contributing

federal political committee.

Other (specify)

Name of Employer Self-Employed

Primary

Mailing Address 2655 Columbus St

General

State

OH

C

Aggregate Year-to-Date ▼

325.00

FOR LINE NUMBER: PAGE 20/38 Use separate schedule(s) (check only one) or each category of the 11a 11b 11c **Detailed Summary Page** 13 14 16 17 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. OHIO DENTAL ASSOCIATION POLITICAL ACTION COMMITTEE Date of Receipt 0 2 24 2006 Zip Code Transaction ID: SA11A1.18741 43123 Amount of Each Receipt this Period 75.00 Occupation Dentist

SUBTOTAL of Receipts This Page (optional)	•	75.00
TOTAL This Period (last page this line number only)	<u> </u>	13925.00

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S	CHEDULE B (FEC Form 3X)	Use seperate	schedule(s)		NUMBER: PAGE 21/38
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\	NAME OF COMMITTEE (In Full)				
/	OHIO DENTAL ASSOCIATION POLITI	CAL ACTION CO	MMITTEE		
	Full Name (Last, First, Middle Initial)				Transaction ID: SB21B.18866
٩.	Firestone Country Club				Date of Disbursement
	Mailing Address 452 East Warner Rd				03
	City		Code		Amount of Each Disbursement this Period
	Arkon	OH 44	319		204.00
	Purpose of Disbursement Fundraiser			003	834.20
	Candidate Name			Category/ Type	MENO ITEM
	Office Sought: House Disb Senate President	ursement For: X Primary Other (specify)	2006 General		[MEMO ITEM]
	State: District:		•		

		0.00
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OHIO DENTAL ASSOCIATION POLITICAL	ACTION COMMITTEE					
Full Name (Last, First, Middle Initial)				on ID: SB29.1	18799	
Citizens for Buehrer				sbursement	V	V
Mailing Address Treas: Sandra Buehrer 319 W. Elm Street			01	26	Ý Ž0Ŏ6	
	State Zip Code OH 43567		Amount of	Each Disburs	ement this P	eriod
Purpose of Disbursement	311 43307				2500.0	0
Contribution						
Candidate Name		Category/ Type				
Office Sought: House Disburser Senate X	nent For: 2006 Primary General					
President	Other (specify)					
State: District:						
Full Name (Last, First, Middle Initial)				on ID: SB29.1	18840	
5. Citizens for Gardner Committee			M M /	sbursement	YYY	Υ
Mailing Address Treas: Michael Sibberser 431 N. Prospect Street			0 2	16	[*] 2006	
,	State Zip Code OH 43402		Amount of	Each Disburs	ement this P	eriod
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Candidate Name	-	Category/ Type				
President	nent For: 2006 Primary General Other (specify)					
State: District:						
Full Name (Last, First, Middle Initial) Citizens for Geoffrey C. Smith			Date of Dis	on ID: SB29.1 sbursement		v
Mailing Address Treas: Bill Curlis 865 Macon Alley			02	16	Ý Ž0Ŏ6	Y
	State Zip Code OH 43206		Amount of	Each Disburs	ement this P	eriod
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Candidate Name	١,	Category/ Type				
Office Sought: Senate President State: Disburser X Disburser	nent For: 2006 Primary General Other (specify)					
-					5500.0	0
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or for come NAME OHIO Full Na A. Citize	mercial purposes, other than using the nam OF COMMITTEE (In Full)					nose of s	oliooting		
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A. Citize		L ACTION COMMITTEE							
	ame (Last, First, Middle Initial)					action ID:		18818	
Mailing	ns for Jim Petro					f Disburs		Y Y Y	Y
	Address Treas: Jonathon Hughe 64 E. Broad Street	5			0 2		6 /	žoŏ	6
City Colun	nbus	State Zip Code OH 43215			Amour	nt of Each	Disburs	ement this	Period
	se of Disbursement			•				1000	.00
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B. Citize	ns for Larry Wolpert					f Disburs	ement		Y
Mailing	Address 100 S. Third Street Treas: Kurtis A. Tunnell				0 2		6 /	žoŏ	6
City Colun	nbus	State Zip Code OH 43215			Amour	nt of Each	Disburs	ement this	
	Purpose of Disbursement Contribution							250	.00
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	Senate X President	ement For: 2006 Primary General Other (specify)							
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_	ns for McGregor					action ID: f Disburs	ement		V
Mailing	Address Treas: Thomas Goodfe 5524 Old Columbus Roa				0 2	<u>່</u> ໄດ້ເ	8 /	žoŏ	6
City Spring	gfield	State Zip Code OH 45502			Amour	nt of Each	Disburs	ement this	Period
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SCHEDULE B (FEC Form 3X)	Use seperate sched	iule(s) _{(cl}	OR LINE N heck only o			PAGE	24/3	38
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NAME OF COMMITTEE (In Full) OHIO DENTAL ASSOCIATION POLITICA	AL ACTION COMMI	TTFF						
/								
Full Name (Last, First, Middle Initial) A. Citizens for Reidelbach				Date of I	Disburser			_
Mailing Address Treas: Ms. Susan Kyte 57 E. Gay Street				02	[/] 1 (6 / Y 2	2006	; [*]
City Columbus	State Zip Code OH 43215	,		Amount	of Each [Disbursemer		
Purpose of Disbursement Contribution							250.0)0
Candidate Name		Categ Typ						
Senate President	ement For: 2006 (Primary Ger Other (specify)	6 neral						
State: District:								
Full Name (Last, First, Middle Initial) B. Citizens for Stivers					Disburser		_	V
Mailing Address Treas: Wade Steen 2500 Sherwin Road				0 2	1 1 4	4 2	ž 0 ŏ 6	,
City Columbus	State Zip Code OH 43221			Amount	of Each [Disbursemer		
Purpose of Disbursement Contribution		•					500.0	00
Candidate Name		Categ Typ						
ÿ	ement For: 2006 Primary Ger Other (specify)	6 neral						
Full Name (Last, First, Middle Initial) C. Citizens for Wagoner					tion ID: S	SB29.1881	5	
Mailing Address Treas: John Wagoner 7445 Airport Highway				0 2	/ D1(ž 0 ŏ 6	, Y
City Holland	State Zip Code OH 43528	9		Amount	of Each [Disbursemer	nt this P	Period
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NAME OF COMMITTEE (In Full)									
OHIO DENTAL ASSOCIATION POLITICA	AL ACTION COMMITTEE								
Full Name (Last, First, Middle Initial)			Т	ransa	ction ID	: SB29.1	1883	3	
Citizens to Elect James M Hoops				Date of	Disburs		v v	V	V
Mailing Address Teas: Marie Heitmeyer 195 Old Creek Drive				0 1		23 /	2	0 Ď 6	
City Napoleon	State Zip Code OH 43545		<i>A</i>	Amount	of Each	Disburs	emen	this P	eriod
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Contribution									
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	ement For: 2006 (Primary General								
Senate President	C Primary General Other (specify) ▼								
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Full Name (Last, First, Middle Initial)			Т	ransa	ction ID	: SB29.1	1881)	
Comm Elect Michelle Schneider					Disburs		V • V	V *	V
Mailing Address Treas: John Murray 8138 Maxfield Lane				0 2] [/]	6 /	ž	0 Ď 6	Y
City Cincinnati	State Zip Code OH 45243		1	Amount	of Each	Disburs	emen	this P	eriod
Purpose of Disbursement Contribution	1011 10210	•	† [500.0	00
Candidate Name	-	egory/ vpe							
Senate President	ement For: 2006 Primary General Other (specify)								
State: District:									
Full Name (Last, First, Middle Initial) Committee for Blasdel				Date of	Disburs				
Mailing Address Treas: Lisa Blasdel 16429 Harvard Avenue				0 2	/ D	6 /	ž	0 ŏ 6	Y
City East Liverpool	State Zip Code OH 43920		A	Amount	of Each	Disburs	emen	this P	eriod
Purpose of Disbursement Contribution		•						500.0	00
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TEMIZED DISBURSEMENTS	for each category of the Detailed Summary Page		21b	Ć.	22 [23		24		25		26
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NAME OF COMMITTEE (In Full)	, , , , , , , , , , , , , , , , , , ,											
OHIO DENTAL ASSOCIATION POLITICA	AL ACTION COMMITTEE											
Full Name (Last, First, Middle Initial)				Т	ransa	ction I	D: SE	329.1	8834	ļ		
Committee for Blasdel					Date of	Disbu		ent	· · ·	V	V	
Mailing Address Treas: Lisa Blasdel 16429 Harvard Avenue					0 3 "]	27	ľ	2	0 ŏ 6		
City East Liverpool	State Zip Code OH 43920			1	4moun	t of Ead	ch Dis	sburse	ment	this P	erioc	
Purpose of Disbursement	011 45920			+					1	000.0	0	7
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	sement For: 2006 C Primary General Other (specify)											
Full Name (Last, First, Middle Initial)				ļ.,	•		D OF	200.4	0054			_
3. Committee for Jon M. Peterson					Date of	ction I Disbu	rseme	ent			V	
Mailing Address Treas; Shelby V. Hutch 178 Hillside Drive	ins				0 2		16	ľ	2	0 ŏ 6		
City Delaware	State Zip Code OH 43015			<i> </i>	Amoun	t of Ead	ch Dis	sburse	ment	this P	erioc	_
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Candidate Name			egory/ vpe									
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Full Name (Last, First, Middle Initial)					ranca	ction I	n. ci	220.1	0011			_
Committee to Elect Earl Martin					Date of	Disbu	rseme				Υ	
Mailing Address 34050 Garrett Drive Treas: Margaret Knight					0 2		16		2	0 ŏ 6		
City North Ridgeville	State Zip Code OH 44039			1	Amoun	t of Ead	ch Dis	sburse				7
Purpose of Disbursement Contribution		·								500.0	00	_
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or for commercial purposes, other than using the name NAME OF COMMITTEE (In Full)	and address of any political co	ommittee to sc	oncii contribu	uons from su	cri committee	
OHIO DENTAL ASSOCIATION POLITICAL	ACTION COMMITTEE					
Full Name (Last, First, Middle Initial)			Transac	tion ID: SB2	9.18805	
Committee to Elect Joe Uecker				Disbursement		V
Mailing Address 298 Indianview Drive Treas: Joe Uecker			0 2	16	y žoŏ	6 '
	State Zip Code		Amount of	of Each Disbu	rsement this	Period
Loveland Purpose of Disbursement	OH 45140				250.	00
Contribution						
Candidate Name		Category/ Type				
Office Sought: House Disburser Senate X	ment For: 2006 Primary General					
President District:	Other (specify)					
State: District: Full Name (Last, First, Middle Initial)			_		0.40007	
3. Committee to Elect Ray Miller				tion ID: SB2 Disbursement		V
Mailing Address Treas; Candace Watkins 17 South High Street			0 2	16	Ý Ž O Ď	6
•	State Zip Code OH 43215		Amount	of Each Disbu	ursement this	
Purpose of Disbursement Contribution			L		250.	00
Candidate Name		Category/ Type				
Office Sought: House Disburset Senate X President	nent For: 2006 Primary General Other (specify) ▼					
State: District:						
Full Name (Last, First, Middle Initial) Comm to Elect David Goodman				tion ID: SB2 Disbursement		
Mailing Address Treas: John Rosan 2736 Bexley Park Road			0 2	16	^Y 200	6 ^Y
City	State Zip Code OH 43209		Amount	of Each Disbu	ursement this	Period
Purpose of Disbursement Contribution					500.	00
Candidate Name		Category/ Type				
Office Sought: Senate President State: Disburser X Disburser	nent For: 2006 Primary General Other (specify)					
State. District.						
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NAME OF COMMITTEE (In Full)	71									
OHIO DENTAL ASSOCIATION POLITICA	L ACTION COMMITTEE									
Full Name (Last, First, Middle Initial)				Tra	ansac	tion ID:	SB29.1	883	1	
Comm to Elect Fred Strahorn					ate of I	Disburs		v • v	V *	V
Mailing Address Treas: Tom Roberts 223 Kenwood Avenue					2 "		6 /	2	0 Ď 6	
City Dayton	State Zip Code OH 45406			Ar	nount	of Each	Disburs	emen	t this P	eriod
Purpose of Disbursement	45400			+ [250.0	0
Contribution										
Candidate Name		Cate Ty	gory/ pe							
	ement For: 2006 Primary General									
President	Other (specify)									
State: District:										
Full Name (Last, First, Middle Initial) Comm to Elect Kenny Yuko						tion ID: Disburs	SB29.1	885	0	
					M2 M		6 /	Y Y	0 ŏ 6	Υ
Mailing Address Treas: Pamela Yuko 479 Pierson Drive					•			^		
City Richmond Heights	State Zip Code OH 44143			Ar	nount	of Each	Disburs	emen	t this P	eriod
Purpose of Disbursement Contribution		-		† L					250.0	00
Candidate Name		Cate	gory/ pe							
	ement For: 2006 Primary General Other (specify)									
Full Name (Last, First, Middle Initial)				+_			0000			
Comm to Elect Steve Reinhard				Da	ate of I	Disburs	SB29.1			V
Mailing Address Treas: Edward Pfiefer 3904 State Route 19					2 "	1	6	2	0 Ď 6	
City Bucyrus	State Zip Code OH 44820			Ar	nount	of Each	Disburs			-
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NAME OF COMMITTEE (In Full) OHIO DENTAL ASSOCIATION POLITICAL	ACTION COMMITTEE							
Full Name (Last, First, Middle Initial)				Trans	action II	D : SB29.	18842	
Danny Bubp for State Rep Comm					of Disbur		V * V * V	,
Mailing Address Treas: Wendell Rickey 18877 St. Rt. 136				0 ^M 3	M / D	27 ^D	žoč	6
	State Zip Code OH 45697			Amou	int of Eac	h Disburs	ement this	s Period
Purpose of Disbursement	43037						300	0.00
Contribution								
Candidate Name		Categ Typ						
Office Sought: House Disburser Senate X	nent For: 2006 Primary General							
	Other (specify)							
State: District:								
Full Name (Last, First, Middle Initial) Friends of Bill Coley					action II of Disbur	D: SB29.	18800	
				M 2	M / D		žoč) 6 Y
Mailing Address 5336 Windbrook Trail Treas: Carolyn Coley				0 2		10	200	7.0
,	state Zip Code OH 45069			Amou	int of Eac	h Disburs	ement this	s Period
Purpose of Disbursement Contribution				<u>L.</u>			500	0.00
Candidate Name		Categ						
Office Sought: House Disburser								
Senate X President	Primary General Other (specify) ▼							
State: District:	Carlor (opeony)							
Full Name (Last, First, Middle Initial)						D: SB29.	18852	
Friends of Dale Miller				M	of Disbur		Y	· · · · · · · · · · · · · · · · · · ·
Mailing Address Treas: Doug Henderson 4300 W. 143rd Street				0 2		16	žoč	0.6
	state Zip Code OH 44135			Amou	int of Eac	h Disburs	ement this	s Period
Purpose of Disbursement Contribution		_		T L.			500	0.00
Candidate Name		Cateo						
Office Sought: House Disburser Senate X	nent For: 2006 Primary General							
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State: District:								
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Any Information copied from such Reports and Stater or for commercial purposes, other than using the nam							ıs
NAME OF COMMITTEE (In Full) OHIO DENTAL ASSOCIATION POLITICA	AL ACTION C	COMMITTEE					
Full Name (Last, First, Middle Initial) - Friends of Faber					ion ID: SB29	.18836	
Mailing Address Treas: Nell Franklin c/o Harley Jones				0 2	16	2006	3 Y
City Celina		Zip Code 45822		Amount o	of Each Disbur		
Purpose of Disbursement Contribution				L		250.	00
Candidate Name			Category/ Type				
Senate X President	ement For: Primary Other (specif	2006 General fy) ▼					
State: District: Full Name (Last, First, Middle Initial) Friends of Jim Raussen					ion ID: SB29	.18817	
Mailing Address Treas: Denese Dye 529 Observatory Drive				0 2	16	ž 0 0 e	3 Y
City Cincinnati		Zip Code 45246		Amount o	of Each Disbur	sement this	Period
Purpose of Disbursement Contribution Candidate Name			Category/ Type	L		2000.	00
ÿ	ement For: Primary Other (specif	2006 General fy) ▼	Туре				
Full Name (Last, First, Middle Initial) Friends of John Widowfield					ion ID: SB29	.18813	
Mailing Address Treas: Scott Fitzsimmol 2037 14th Street	ns			0 2	16	2006	6 ^Y
City Cuyahoga Falls		Zip Code 44223		Amount o	of Each Disbur		
Purpose of Disbursement Contribution						500.	00
Candidate Name			Category/ Type				
· -	ement For: Primary Other (specif	2006 General fy) ▼					
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SCHEDULE B (I LOT OHII 3X)	Use seperate schedule(s)		NUMBER:		PAGE 3	1 / 38
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NAME OF COMMITTEE (In Full) OHIO DENTAL ASSOCIATION POLITICAL	ACTION COMMITTEE					
Full Name (Last, First, Middle Initial)			Transact	ion ID: SB	29.18812	
Friends of John Widowfield)isbursemer		V * V
Mailing Address Treas: Scott Fitzsimmons 2037 14th Street	3		03	16	20	δ΄6 [°]
,	tate Zip Code OH 44223		Amount o	of Each Dist	oursement th	nis Period
Purpose of Disbursement	711 44223				4	00.00
Contribution						
Candidate Name		Category/ Type				
Office Sought: House Disburser Senate X	nent For: 2006 Primary General					
	Other (specify)					
State: District:						
Full Name (Last, First, Middle Initial)				ion ID: SB		
Friends of Matthew J. Dolan			M M)isbursemer		YY
Mailing Address Treas: Robert Dolan 100 7th Ave. Box 12			0 2	1 6	20	06°
,	tate Zip Code OH 44024		Amount o	of Each Dist	oursement th	nis Period
Purpose of Disbursement Contribution				0 0	5	00.00
Candidate Name		Category/ Type				
Office Sought: House Disburser Senate X President	nent For: 2006 Primary General Other (specify)					
State: District:						
Full Name (Last, First, Middle Initial) Friends of Michael J. Skindell				ion ID: SB: isbursemer		
Mailing Address 16800 Delaware Avenue Treas: Donna Taylor-Kolis			0 2	¹ 16	y žo	0 6 °
City	tate Zip Code OH 44107		Amount o	of Each Dist	oursement th	nis Period
Purpose of Disbursement Contribution					2	50.00
Candidate Name		Category/ Type				
	nent For: 2006 Primary General Other (specify)					
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\rangle	OHIO DENTAL ASSOCIATION POLITICA	L ACTION COMMITTE	ΞE									
Α.	Full Name (Last, First, Middle Initial)									9.1883	9	
А.	Husted for Ohio						of D		ement	V \	/ · Y	Y
	Mailing Address 148 Sherbrooke Drive Treas: Carl Wick					0 ^M 2			6 /	2	o ŏ e	3
	City Kettering	State Zip Code OH 45429				Amou	ınt o	f Each	Disbu	rsemer	nt this I	Period
	Purpose of Disbursement	10120	T		-					2	2500.	00
	Contribution		4 L									
	Candidate Name				egory/ vpe							
	Senate X President	ement For: 2006 Primary Genera Other (specify)	al									
_	State: District:											
В.	Full Name (Last, First, Middle Initial) Husted for Ohio					Date	of D	isburs	ement	9.1883		_
	Mailing Address 148 Sherbrooke Drive Treas: Carl Wick					0 3	М	/ D 1	6 /	Y	o ŏ e	6 Y
	City Kettering	State Zip Code OH 45429				Amou	ınt o	f Each	Disbu	rsemer		
	Purpose of Disbursement Contribution					L.					3000.	00
	Candidate Name				egory/ /pe							
	9 🗎	ement For: 2006 Primary Genera Other (specify)	al									
	State: District:											
C.	Full Name (Last, First, Middle Initial) Jennifer Garrison for St Rep							-	: SB29 ement	9.1881	4	
	Mailing Address Trea: Holly Dexter 205 Grant Edwards					0 ^M 2	М	/ D 1	6 /	Y	o ŏ e	6 ^Y
	City Marietta	State Zip Code OH 45750				Amou	ınt o	f Each	Disbu	rsemer		
	Purpose of Disbursement Contribution					<u> </u>	-				250.	00
	Candidate Name				egory/ /pe							
	Senate X President	ement For: 2006 Primary General Other (specify)	al									
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SCHEDULE B (FEC Form 3X)	Use seperate schedule(s)	FOR LINE I	-	PAGE 33/38
TEMIZED DISBURSEMENTS	for each category of the Detailed Summary Page	21b 27 27	22 23 28a 28b	
Any Information copied from such Reports and Staten or for commercial purposes, other than using the nam				
NAME OF COMMITTEE (In Full) OHIO DENTAL ASSOCIATION POLITICA	L ACTION COMMITTEE	:		
Full Name (Last, First, Middle Initial) Jimmy Stewart State Rep.			Transaction II Date of Disbur	D: SB29.18816 rsement
Mailing Address Treas: Pete Lehman 477 Richland Avenue			02 /	16 7 2006
	State Zip Code OH 45701		Amount of Eac	ch Disbursement this Period
Purpose of Disbursement Contribution				300.00
Candidate Name	one and Farry 00000	Category/ Type		
Senate X President	ement For: 2006 Primary General Other (specify)			
State: District: Full Name (Last, First, Middle Initial) Oelslager for Ohio Committee			Transaction II	D: SB29.18808 sement
Mailing Address Treas: Paul Stolic 220 Market Avenue Sout	 h		02 /	16 7 2006
City Canton	State Zip Code OH 44702		Amount of Eac	ch Disbursement this Period
Purpose of Disbursement Contribution Candidate Name		Category/ Type		250.00
ÿ	ement For: 2006 Primary General Other (specify)	,,		
Full Name (Last, First, Middle Initial) Ohioans for Ken Blackwell			Transaction II Date of Disbur	D: SB29.18844 rsement
Mailing Address Treas: William Curtis 865 Macon Alley			01	19 / 2006
	State Zip Code OH 43206		Amount of Eac	ch Disbursement this Period
Purpose of Disbursement Contribution Candidate Name				3000.00
	ement For: 2006	Category/ Type		
· -	Primary General Other (specify) ▼			
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	y Information copied from such Reports and Stater for commercial purposes, other than using the nam														าร	
\setminus	NAME OF COMMITTEE (In Full)															
\rangle	OHIO DENTAL ASSOCIATION POLITICA	L ACTION	COMMITTEE													
Α.	Full Name (Last, First, Middle Initial) Ohio House Rep. Campaign Comm							Trans Date of				_	.1882	21		
	Mailing Address Treas: J. Matthew Yusk 4679 Winterset Drive	ewich						0 ^M 3	М	/ [16	3	Y	ž 0 ŏ	6 ^Y	
	City Columbus	State OH	Zip Code 43220					Amou	nt o	f Ea	ch C	isbur	seme	nt this	Perio	d
	Purpose of Disbursement Contribution			Γ	•									2500	00	
	Candidate Name			С	ate Ty	gory/ pe										
	Senate X President	ement For: Primary Other (spe	2006 General													
_	State: District:															
В.	Full Name (Last, First, Middle Initial) Redfern 2006							Trans Date of	of D	isbu	rsen	nent				
	Mailing Address Treas: Mark Mulligan 3750 N. Roger Drive							0 2	М	/ L	16	3	Ľ ź	200	6 ^Y	
	City Port Clinton	State OH	Zip Code 45452					Amou	nt o	f Ea	ch C	isbur	seme	nt this		d
	Purpose of Disbursement Contribution			Г										500	00	_
	Candidate Name			С	ate Ty	gory/ pe										
	* H	ement For: Primary Other (spe	2006 General													
С.	Full Name (Last, First, Middle Initial) Setzer for Representative							Trans					.1883	32		
	Mailing Address Treas: Susan Bantz	٠							М		16		Y	ž 0 Ŏ	6 ^Y	
	375 E. Stonequarry Road City Vandalia	State OH	Zip Code 45377-9749					Amou	nt o	f Ea	ch C	isbur	seme	nt this	Perio	d
	Purpose of Disbursement Contribution							<u></u>	_			_		500	00	_
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or for commercial purposes, other than using the name NAME OF COMMITTEE (In Full)	and address or any political co	minnilee lo sc	men contribu	uons nom suc	11 COMMINUEE	
OHIO DENTAL ASSOCIATION POLITICAL	ACTION COMMITTEE					
Full Name (Last, First, Middle Initial)			Transact	ion ID: SB29	.18837	
Shawn Webster Re-Election Comm				Disbursement / D D /	V V V V	V
Mailing Address Treas: Sandra Caldwell 3316 Woodside Drive			0 2	16	žoŏe	
	State Zip Code OH 45014		Amount	of Each Disbu		
Purpose of Disbursement	Г				1000.0	00
Contribution Candidate Name		Category/				
cardidate Harris		Type				
Office Sought: House Disburser						
Senate X President	Primary General Other (specify) ▼					
State: District:						
Full Name (Last, First, Middle Initial)				ion ID: SB29	.18819	
Strickland for Governor			Date of D	Disbursement	YYYY	Y
Mailing Address Treas: Michael Johrendt PO Box 15055			0 1	23	2006	6
•	State Zip Code OH 43215		Amount o	of Each Disbui	rsement this F	Period
Purpose of Disbursement Contribution		• •			8000.0	00
Candidate Name		Category/ Type				
President	nent For: 2006 Primary General Other (specify)					
State: District: Full Name (Last, First, Middle Initial)			Tueneed	ion ID: CD00	10000	
T. K. Yates for the Ohio House			Date of D	ion ID: SB29 Disbursement		Y
Mailing Address Treas: Samantha Herd 2200 Victory Parkway #70			0 2	16	žoŏe	
	State Zip Code OH 45206		Amount	of Each Disbu	rsement this F	Period
Purpose of Disbursement Contribution			<u> </u>		250.0	00
Candidate Name	-	Category/ Type				
Office Sought: Senate President State: Disburser X Disburser	nent For: 2006 Primary General Other (specify)					
Simo. Significan						
SUBTOTAL of Disbursements This Page (optional)		>			9250.0	00
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	y Information copied from such Reports and Staten											ıs
or	for commercial purposes, other than using the name	e and address of any politica	al com	nm	ittee to	Solicit cor	itribu	tions tr	om su	cn com	mittee	
$ \rangle$	NAME OF COMMITTEE (In Full) OHIO DENTAL ASSOCIATION POLITICA		=									
	ONIO DENTAL ASSOCIATION FOLITICA	L ACTION COMMITTE	_									
Α.	Full Name (Last, First, Middle Initial)					1			_	9.1882	26	
Λ.	Team Coughlin							Disburs / D		Υ ,	/ · /	Υ
	Mailing Address Treas: Donald K. Pond 2324 Iota Avenue					O 2	2	Ĺ	16	2	2 0 0 C	6
	City Cuyahoga Falls	State Zip Code OH 44223				Amo	ount o	of Each	n Disbu	ırsemer	nt this	Period
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В.	Team Coughlin					_		Disburs	ement	9.1882		V
	Mailing Address Treas: Donald K. Pond 2324 Iota Avenue					o c	3 "	/ L	1 6	. 2	žοŏ	6
	Cuyahoga Falls	State Zip Code OH 44223				Amo	ount o	of Each	n Disbu	irsemei		
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	Candidate Name				egory/ /pe							
	Senate X President	ement For: 2006 Primary General Other (specify)										
	State: District:											
C.	Full Name (Last, First, Middle Initial) Team Coughlin					Date	of D	Disburs	ement	9.1886		_
	Mailing Address Treas: Donald K. Pond 2324 lota Avenue					0 ^M 3	3 ^M	/ D	20	Y	ž 0 ŏ (3 Y
	City Cuyahoga Falls	State Zip Code OH 44223				Amo	ount (of Each	n Disbu	irsemei		
	Purpose of Disbursement In-Kind Fundraising expenses - See 21(b)			0	03						834.	20
	Candidate Name		Ca	ate	egory/ /pe							
	Senate X President	ement For: 2006 Primary General Other (specify)										
	L								•		834.	20
Ľ ^s	UBTOTAL of Disbursements This Page (optional)				. •			-		- 4	.054.	
т	OTAL This Period (last page this line number only)	·			•							

SCHEDULE B (FEC Form 3X)	Use seperate schedule(s)	FOR LINE (check only	
ITEMIZED DISBURSEMENTS	for each category of the Detailed Summary Page	21b 27	22 23 24 25 26 28a 28b 28c X 29 30b
Any Information copied from such Reports and Statemor for commercial purposes, other than using the name			
NAME OF COMMITTEE (In Full)			
OHIO DENTAL ASSOCIATION POLITICAL	- ACTION COMMITTEE		
Full Name (Last, First, Middle Initial) A. The Cordray Committee			Transaction ID: SB29.18848 Date of Disbursement
Mailing Address Treas; Mary Ellen Withro P.O. Box 1776)W		$\begin{bmatrix} \begin{smallmatrix} M & 2 & M \\ 0 & 2 & M \end{smallmatrix} \end{bmatrix} \ \begin{bmatrix} \begin{smallmatrix} D & D \\ 1 & 6 \end{smallmatrix} \end{bmatrix} \ \begin{bmatrix} \begin{smallmatrix} Y & Y & Y & Y & Q & Y \\ 2 & 0 & 0 & 6 & Y \end{bmatrix}$
City	State Zip Code OH 43216		Amount of Each Disbursement this Period
Purpose of Disbursement Contribution			1000.00
Candidate Name		Category/ Type	
Senate X President	ment For: 2006 Primary General Other (specify)		
State: District:			
Full Name (Last, First, Middle Initial) B. The Perry Committee			Transaction ID: SB29.18807 Date of Disbursement
Mailing Address 886 Ogden Avenue Treas: Kathleen Beach			$\begin{bmatrix} \begin{smallmatrix} M & M \\ O & Z \end{smallmatrix} \end{bmatrix} \ \begin{bmatrix} \begin{smallmatrix} D & D \\ I & G \end{smallmatrix} \end{bmatrix} \ \begin{bmatrix} \begin{smallmatrix} Y & Y & Y & Y & Y \\ Z & O & O & G \end{smallmatrix} \end{bmatrix}$
•	State Zip Code OH 43609		Amount of Each Disbursement this Period
Purpose of Disbursement Contribution		* *	250.00
Candidate Name		Category/ Type	
• 🗎 –	ment For: 2006 Primary General Other (specify)		
Full Name (Last, First, Middle Initial) C. Tim Schaeffer for State Rep.			Transaction ID: SB29.18824 Date of Disbursement
Mailing Address Treas: John Snyder 1173 Stone Run Court			$\begin{bmatrix} \begin{smallmatrix} M & M & M \\ 0 & 2 & M \end{smallmatrix} \end{bmatrix} / \begin{bmatrix} \begin{smallmatrix} D & D \\ 1 & 6 \end{smallmatrix} \end{bmatrix} / \begin{bmatrix} \begin{smallmatrix} Y & Y & Y & Y \\ 2 & 0 & 0 & 6 \end{smallmatrix} \end{bmatrix}$
City	State Zip Code OH 43130		Amount of Each Disbursement this Period
Purpose of Disbursement Contribution			750.00
Candidate Name		Category/ Type	
• 🗎 –	ment For: 2006 Primary General Other (specify)		
SUBTOTAL of Disbursements This Page (optional)			2000.00
TOTAL This Period (last page this line number only)		<u> </u>	

91	CHEDULE B (FEC Form 3X)			- 1 -			_
	•		erate schedule(s)			NE NUMBER: PAGE 38 / 38 only one)	_
IT	EMIZED DISBURSEMENTS		category of the		7 21b		
		Detailed	Summary Page	I⊢	27	28a 28b 28c X 29 30	
	y Information copied from such Reports and Stor commercial purposes, other than using the						
\vdash	NAME OF COMMITTEE (In Full)						-
\rangle	OHIO DENTAL ASSOCIATION POLI	TICAL ACTION	COMMITTEE				
	Full Name (Last, First, Middle Initial)					Transaction ID: SB29.18823	
Α.	Tim Schaeffer for State Rep.					Date of Disbursement	
	Mailing Address Treas: John Snyde 1173 Stone Run Co	r urt				0 3 M / 2 7 / Y Y O O 6 Y	
	City Lancaster	State OH	Zip Code 43130			Amount of Each Disbursement this Period	
	Purpose of Disbursement Contribution					500.00	
	Candidate Name				gory/ pe		
	Senate President	sbursement For: X Primary Other (spe	2006 General				
	State: District:						_
ь	Full Name (Last, First, Middle Initial)					Transaction ID: SB29.18841	
В.	Zurz Campaign Committee					Date of Disbursement	
	Mailing Address 3773 Muirfield Drive Treas: Sandra Kaler					$\begin{array}{c ccccccccccccccccccccccccccccccccccc$	
	City Uniontown	State OH	Zip Code 44685			Amount of Each Disbursement this Period	
	Purpose of Disbursement Contribution					250.00	
	Candidate Name				gory/ pe		
	Senate President	sbursement For: X Primary Other (spe	2006 General				
	State: District:						

		750.00
SUBTOTAL of Disbursements This Page (optional)	>	750.00
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